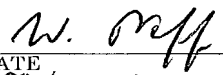
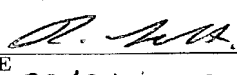
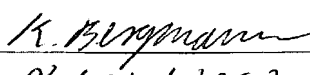


COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY (includes Reference to PCT International Applications)			ATTORNEY'S DOCKET NUMBER 127FR/50787
As a below named inventor, I hereby declare that:			
My residence, post office address and citizenship are as stated below next to my name.			
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:			
the specification of which (check only one item below):			
<input type="checkbox"/> is attached hereto.			
<input checked="" type="checkbox"/> was filed as United States application Serial No. 10/019,475 on December 31, 2001, And was amended on _____ (if applicable).			
<input type="checkbox"/> was filed as PCT international application Number _____ on _____ and was amended under PCT Article 19 on _____ (if applicable).			
I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.			
I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations. §1.56(a).			
I hereby claim foreign priority benefits under Title 35, United State Code, §119 of any foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States of America listed below and have also identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed:			
PRIOR FOREIGN/PCT APPLICATION(S) AND ANY PRIORITY CLAIMS UNDER 35 U.S.C. 119:			
COUNTRY (if PCT indicate PCT)	APPLICATION NUMBER	DATE OF FILING (day, month, year)	PRIORITY CLAIMED UNDER 35 USC 119
Germany	99 112 403	June 29, 1999	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No

Combined Declaration For Patent Application and Power of Attorney (Continued) (includes Reference to PCT international Applications)				ATTORNEY'S DOCKET NUMBER 127FR/50787	
I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) or PCT international application(s) designating the United States of America that is/are listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in that/those prior application(s) in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application(s) and the national of PCT international filing date of this application:					
PRIOR U.S. APPLICATIONS OR PCT INTERNATIONAL APPLICATIONS DESIGNATING THE U.S. FOR BENEFIT UNDER 35 U.S.C. 120					
U.S. APPLICATIONS			STATUS (Check one)		
U.S. APPLICATION NUMBER	U.S. FILING DATE	PATENTED	PENDING	ABANDONED	
PCT APPLICATIONS DESIGNATING THE U.S.					
PCT APPLICATION NO	PCT FILING DATE	U.S. SERIAL NUMBERS ASSIGNED (IF ANY)			
EP00/06080	June 29, 2000				
POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith. (List name and registration number)					
Herbert I. Cantor, Reg. No. <u>24,392</u> ; James F. McKeown, Reg. No. <u>25,406</u> ; Donald D. Evenson, Reg. No. <u>26,160</u> ; Joseph D. Evans, Reg. No. <u>26,269</u> ; Gary R. Edwards, Reg. No. <u>31,824</u> ; and Jeffrey D. Sanok, Reg. No. <u>32,169</u>					
Send Correspondence to: Crowell & Moring, L.L.P.. P.O. Box 14300 Washington, D.C. 20044-4300				Direct Telephone Calls to: (name and telephone number) (202) 624-2500	
201	FULL NAME OF INVENTOR	FAMILY NAME <u>NEFF</u>	FIRST GIVEN NAME <u>Willi</u>		SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY <u>Kelmis</u> BEX	STATE OR FOREIGN COUNTRY <u>Belgium</u>		COUNTRY OF CITIZENSHIP <u>German</u>
	POST OFFICE ADDRESS	POST OFFICE ADDRESS <u>Joseph-Obertz-Strasse 40</u>	CITY <u>4721 Kelmis</u>		STATE & ZIP CODE/COUNTRY <u>Belgium</u>
202	FULL NAME OF INVENTOR	FAMILY NAME <u>LEBERT</u>	FIRST GIVEN NAME <u>Rainer</u>		SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY <u>Kelmis</u> BEX	STATE OR FOREIGN COUNTRY <u>Belgium</u>		COUNTRY OF CITIZENSHIP <u>German</u>
	POST OFFICE ADDRESS	POST OFFICE ADDRESS <u>Platzegel 21</u>	CITY <u>4721 Kelmis</u>		STATE & ZIP CODE/COUNTRY <u>Belgium</u>
203	FULL NAME OF INVENTOR	FAMILY NAME <u>BERGMANN</u>	FIRST GIVEN NAME <u>Klaus</u>		SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY <u>Herzogenrath</u> DEX	STATE OR FOREIGN COUNTRY <u>Germany</u>		COUNTRY OF CITIZENSHIP <u>Germany</u>
	POST OFFICE ADDRESS	POST OFFICE ADDRESS <u>Rolandstrasse 35-30</u>	CITY <u>D-52134 Herzogenrath</u>		STATE & ZIP CODE/COUNTRY <u>Germany</u>
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true: and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.					
SIGNATURE OF INVENTOR 201 		SIGNATURE OF INVENTOR 202 		SIGNATURE OF INVENTOR 203 	
DATE <u>03/07/2002</u>		DATE <u>02/21/2002</u>		DATE <u>03/01/2002</u>	

Combined Declaration For Patent Application and Power of Attorney (Continued) (includes Reference to PCT international Applications)				ATTORNEY'S DOCKET NUMBER 127FR/50787	
I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) or PCT international application(s) designating the United States of America that is/are listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in that/those prior application(s) in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application(s) and the national of PCT international filing date of this application:					
PRIOR U.S. APPLICATIONS OR PCT INTERNATIONAL APPLICATIONS DESIGNATING THE U.S. FOR BENEFIT UNDER 35 U.S.C. 120					
U.S. APPLICATIONS			STATUS (Check one)		
U.S. APPLICATION NUMBER	U.S. FILING DATE		PATENTED	PENDING	ABANDONED
PCT APPLICATIONS DESIGNATING THE U.S.					
PCT APPLICATION NO	PCT FILING DATE	U.S. SERIAL NUMBERS ASSIGNED (IF ANY)			
POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith. (List name and registration number)					
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Send Correspondence to: Crowell & Moring, L.L.P. P.O. Box 14300 Washington, D.C. 20044-4300				Direct Telephone Calls to: (name and telephone number) (202) 628-8800	
	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME	
204	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP	
	POST OFFICE ADDRESS	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY	
	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME	
205	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP	
	POST OFFICE ADDRESS	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY	
	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME	
206	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP	
	POST OFFICE ADDRESS	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.					
SIGNATURE OF INVENTOR 204		SIGNATURE OF INVENTOR 205		SIGNATURE OF INVENTOR 206	
DATE		DATE		DATE	